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Division of Corporations

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number: I20010000247

Phone : (800) 494-3124

Fax Number

: (305)675-2811

LIMITED LIABILITY COMPANY

CRUNK CUTZ, LLC

Certificate of Status	0
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10/20/2004

He40002098023

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

CRUNK CUTS, LLC

ARTICLE IL ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

1149 INDEPENDENCE TRAIL UNIT K

HOMESTEAD, FL 33034

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent are:

ALBERTO EIRAS

1149 INDEPENDENCE TRAIL UNIT K

HOMESTEAD, FL 33034

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature

ARTICLE IV MEMBERS

Managing Member:

ALBERTO EIRAS

1149 INDEPENDENCE TRAIL UNIT K

HOMESTEAD, FL 33034

Signature of a member or an authorized representative of a

(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

ALBERTO EIRAS

Typed or printed name of signee

14:01 W 63.153